## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			24				[	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			24 mir	านร 20=	* 6			X\$ 9=	36	OR	X\$18=	
INDEPENDENT CLAIMS			3 mi	inus 3 =	* '	0		X43=		OR	. X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT				ı	+145=		OR	+290=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				L	TOTAL	(071	OR	L	
	С	LAIMS AS A	MENDEC	MENDED - PART II						•	OTHER	
	•	(Column 1)		(Column 2) (				SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	1	HIGHI NUME PREVIC PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- C' A114	= .		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPEND				CLAIIVI			+145=		OR	+290=	
	·							TOTAL		20	TOTAL	
				A	ADDIT. FEE		OR	ADDIT. FEE				
(Column 1) (Column 2) (Column 3)										- 5		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=		X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***	CL AIM	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TÖTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column							DDIT. FEE		, ,	ADDIT. FEE	
	`	CLAIMS .		HIGHE		1		r				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	addi- Tional Fee
	Total	*	Minus	**	· .	= .		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
`_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										ı	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR ADDIT. FEE OR ADDIT. FEE												
		ber Previously Paid					foun	nd in the app	ropriate box	in coli	umn 1.	